

PROTECTIVE CLOTHING FORM

I, _____, Fire Chief of the _____ Fire Department, do hereby certify that the Fire Department has the following inventory of Protective Clothing:

Nomex(or equivalent)	_____ Coats	_____ Pants
PBI(or equivalent)	_____ Coats	_____ Pants
Traffic Control / Reflective Vests		_____
Total # Helmets		_____
Total # Pr. Gloves		_____
Total # Pr. Boots		_____
Total # Hoods		_____

Minimum number of **complete outfits** available from the totals above: _____
(1 Complete Outfit = 1-Coat, 1-pair Pants, 1-Helmet, 1-pair Boots, 1-pair Gloves & 1-Hood)

Date: _____ Signed: _____
(Fire Chief signature)

Witness my Hand and Seal, this the _____ day of _____, 20_____.

_____ (Seal)

My Commission Expires: _____